## CHAPTER 75-09.1-04.1 MEDICALLY MONITORED HIGH-INTENSITY INPATIENT TREATMENT ADOLESCENT ASAM LEVEL III.7

Section

75-09.1-04.1-01 Definitions

75-09.1-04.1-02 Provider Criteria 75-09.1-04.1-03 Program Criteria 75-09.1-04.1-04 Admission Criteria

75-09.1-04.1-01. Definitions. As used in this chapter: "Medically monitored intensive inpatient treatment program" means a substance abuse treatment program that provides a planned regimen of 24-hour professionally directed evaluation, observation, medical monitoring, and addiction treatment in an inpatient setting. This program is appropriate for clients whose subacute detoxification, withdrawal, biomedical and emotional, behavioral, or cognitive problems are so severe that they require inpatient treatment but who do not need the full resources of an acute care general hospital or a medically managed inpatient treatment program.

History: Effective October 26, 2004.

General Authority: NDCC 50-06-16, 50-31

Law Implemented: NDCC 50-31

**75-09.1-04.1-02. Provider Criteria.** A medically monitored intensive inpatient treatment program shall:

- Offer 24-hour skilled nursing care, daily onsite counseling services, and the services of a physician 24-hours a day seven days per week;
- 2. Make specialized professional consultation available;

3. Offer the inpatient treatment program for seven days per week with the length of stay to be determined by a client's condition and functioning.

**History:** Effective October 26, 2004.

General Authority: NDCC 50-06-16, 50-31

Law Implemented: NDCC 50-31

**75-09.1-04.1-03. Program Criteria.** A medically monitored intensive inpatient treatment program shall provide:

- A combination of individual and group therapy as deemed appropriate by an assessment and treatment plan;
- Medical and nursing services available onsite to provide ongoing assessment and care of acute detoxification needs, medical, and psychiatric problems;
- A system for referral of clients for identified treatment needs if such services are not available in the program;
- Family treatment services as deemed appropriate by an assessment and treatment plan;

 Educational and informational programming adaptive to individual client needs; and

6. Onsite staff provided or contracted accredited educational services if a client is still in school, GED preparation if the client does not possess a high school diploma and is no longer in school, or short-term educational services linked to home school designed to maintain current learning.

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**75-09.1-04.1-04. Admission Criteria.** Before a medically monitored intensive inpatient program may admit a client, the client must:

- 1. Meet diagnostic criteria for a substance related disorder of the DSM; and
- 2. Meet specifications in at least two of the six ASAM dimensions, at least one of which is in dimensions one, two, or three as in the following criteria:
  - a. The client is experiencing or at risk of acute or subacute intoxication or withdrawal with moderate to severe signs and symptoms or there is a strong likelihood that the client who requires medication will not complete detoxification at another level of care and enter continued treatment or self-help recovery;

- b. A biomedical complication of addiction or co-occurring medical condition requires active nursing and medical monitoring which does not require the resources of an acute care hospital or continued substance use would place the client at risk for serious damage to physical health because of a co-occurring biomedical condition;
- c. The client has problems in one of the following areas requiring 24-hour supervision and a high intensity therapeutic milieu with access to nursing and medical monitoring and treatment: dangerousness or lethality; interference with addiction recovery efforts; social functioning; ability for self-care; or course of illness;
- d. The client exhibits severe impairment in significant life areas such as legal, family, school, or work;
- The client exhibits significant loss of control and relapse symptoms;
   or
- f. The client has had multiple attempts at treatment programs of lower intensity with an inability to stay sober.

History: Effective October 26, 2004. General Authority: NDCC 50-06-16, 50-31 Law Implemented: NDCC 50-31